

**Department of Health Care Finance
 Medical Care Advisory Committee (MCAC)
 State Plan Amendment (SPA) and Rulemaking Report**

June 16, 2022 to September 16, 2022

STATE PLAN AMENDMENTS/WAIVERS

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENT ATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
Appendix K #8	Extends the end date from 09.30.22 to “six (6) months after the end of the PHE” for the increased Registered Nurse (RN) and Licensed Practical Nurse (LPN) components of the reimbursement rate methodology for Supported Living Daily with or without Transportation and Residential Habilitation services for 1915(c) IDD Waiver.	08.26.22			10.1.21	

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENT ATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
FY 2023 Physician Supplemental Payment	Continues periodic supplemental payments for Medicaid-enrolled physician groups, with at least five hundred (500) physicians that are members of the group, that contract with a public general hospital located in an economically underserved area of the District to deliver inpatient, emergency department, and intensive care physician services to Medicaid beneficiaries.	08.22.22			10.1.22	
Behavioral Health Rehabilitation Services	Increases reimbursement rates for Mental Health Rehabilitative Services and Adult Substance Use Rehabilitative Services effective 04.01.22 and again on 10.01.22.	08.03.22			04.01.22	

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		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
Appendix K #7	Extends the date to pay one-time supplemental payments to eligible waiver providers employing Direct Support Professionals (DSPs) to 9.30.22; allows payment for a one-time COVID-19 vaccination incentive payment to eligible waiver providers; allows payment for a hiring and retention incentive payment to eligible HCBS waiver providers; allows increased payment rates for RN and LPN services; allows increased per diem reimbursement rates to IDD waiver providers of Supported Living Daily and Residential Habilitation; and allows for participant-directed PCA in excess of 16 hours per day (up to 24 hours) in the Services My Way program, if authorized.	07.01.22			FY21	
Pharmacy Lock-In Program	Extends the time that a beneficiary has to appeal a decision to include them in the pharmacy lock-in program from fifteen (15) days to ninety (90) days after notification of being identified as a pharmacy lock-in participant.		08.22.23		10.01.23	

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENTATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
Vaccines for Children (VFC) Program	Expands reimbursement for vaccines associated with the VFC program to include reimbursement for administrative fee associated with providing vaccines and immunizations.		08.23.23		09.01.23	
Doula Services	Adds doula services and a covered service under the Medicaid State Plan.		07.22.22		10.01.22	
DC People with Intellectual and Development Disabilities (IDD) Waiver Renewal	(1) Renews the waiver for an additional five (5) years, (2) modifies the Developmental Disabilities (DD) criteria to expand waiver enrollment eligibility, (3) updates specific services, (4) adds new services, and (5) sets reimbursement rates for proposed new services		07.18.22		10.01.22	
DC Individual and Family Support (IFS) Waiver Amendment	(1) Modifies the Developmental Disabilities (DD) criteria to expand waiver enrollment eligibility; (2) adds new services; (3) sets payment rates for new services; (4) adds the option for participant-directed services (PDS); (5) modifies reimbursement methodology to include District-funded payment enhancements; and (6) modifies the waiver enrollment process.		07.18.22		10.01.22	

TITLE	DESCRIPTION	STATUS			TARGET/ ACTUAL IMPLEMENT ATION DATE	NOTES/ CITATION
		Recently Approved (Date)	Pending CMS Review (Date Submitted)	In Development		
Integrated Online Application for Food, Cash, & Medical Benefits	Establishes an alternative, online combined application for food, cash, and medical benefits, which would allow individuals to apply for benefits in the District on a one-stop-shop basis and aligns with the recently approved integrated paper application for food, cash, and medical benefits.		07.14.21		07.26.21	Proposes an alternative online integrated application that aligns with the recently approved integrated paper application.
DC Elderly and Persons with Physical Disabilities Waiver Amendment	Modifies the criteria for involuntary termination of the participant-directed service option to extend the period in which episodes of non-compliance may result in the participant's involuntary termination from twelve (12) to thirty-six (36) months. Allows for supplemental payments to providers and supplemental allocations to participant directed budgets.			X		
Medicaid Eligibility SPA	(1) Technical change to move covered eligibility groups from traditional State Plan preprint pages to CMS's new MACPRO system. (2) Substantive change to waive income eligibility restriction to disregard all income between statutory limit (150% FPL) and District income eligibility levels for Medicaid for all 1915(i) services in the District.			X	10.01.22	

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Mandatory COVID-19 ARPA SPA	Authorizes an increased reimbursement to one hundred percent (100%) of the Medicare rates for COVID-19 treatments (such as medical supplies and therapies, including preventive therapies), COVID-19 PCR testing, COVID-19 vaccines and vaccine administration, and treatments for conditions that would seriously complicate COVID-19 treatment.			X	FY21	
COVID Vaccine Administration Rate Increase (Permanent Authority)	Raises the vaccine administration rates from 80% of the Medicare rate to 100% of the Medicare rate.			X	FY21	Amends Attachment 4.19B
Burial Funds/ Excess Resources Financial Eligibility	Establishes limitations on the amount of burial funds that would be excluded from countable resources for individuals that are subject to a resource test.			X	FY21	Amends Supplement 8b to Attachment 2.6A
Unborn Child/ Pregnant Woman Children's Health Insurance Program (CHIP)	Provides CHIP eligibility to unborn children of pregnant women during the prenatal period of undocumented immigrant mothers who are not eligible or enrolled in other health coverage.			X	FY23	Creates a new CHIP State Plan
Medication Therapy Management (MTM)	Establishes MTM as a service delivered by pharmacists.			X	FY23	

RULES

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
Final Rule – Fiscal Year 2023 Physician Supplemental Payment	Extends physician supplemental payments to FY 2023.	09.16.22			
Final Rule – Other Licensed Providers (Emergency and Proposed)	Permits the District Medicaid program to enroll additional licensed providers (psychologists, licensed independent clinical social workers, licensed professional counselors and licensed marriage and family therapists).	09.02.22			Amends Chapter 9 of Title 29 DCMR
Final Rule – Home and Community-Based Services Waiver for Individuals with Intellectual and Developmental Disabilities (IDD)	Proposes changes to the standards governing cost reporting to clarify that ID/DD Waiver providers must use cost report templates designated by DHCF and to require expenditures reported on the cost reports to comply, unless specified otherwise by DHCF, with the allowable cost principles in the Medicare Principles of Reimbursement	08.12.22			Amends Chapter 19 of Title 29 DCMR

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
Final Rule – Home and Community-Based Services Waiver for Individual and Family Support (IFS)	Establishes standards governing eligibility criteria for participants, covered services, conditions of participation for providers, reimbursement, data collection, reporting requirements, and quality improvement for the District IFS Waiver program.	08.12.22			Adds new Chapter 90 to Title 29 DCMR
Final Rule – Postpartum Extension (Emergency and Proposed)	Extends the District Medicaid program’s postpartum coverage period from sixty (60) days to twelve (12) months.	08.05.22			Amends Chapters 95 and 100 of Title 29 DCMR
Proposed Rule - Adult Substance Use Rehabilitative service (ASURS)/Mental Health Rehabilitation Services (MHRS)	Proposes changes to ASURS and MHRS rulemakings to clarify requirements for utilization management and qualified providers.	08.26.22			Amends rules at Chapters 52 and 91 of Title 29 DCMR
Final Rule – Medically Needy Spend Down (Emergency and Second Proposed)	Clarifies the eligibility factors for medically needy individuals whose income exceeds the maximum income for their eligibility category but are otherwise eligible for Medicaid, and details the medically needy spend down process for medically needy individuals to become eligible for Medicaid.		X		Creates new Sections 9515 and 9516 of chapter 95 of Title 29 DCMR

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
Final Rule – MAGI-Based Income Methodology Update	Updates the Medicaid eligibility rules governing MAGI-based income methodology to comply with federal legislative changes from the Tax Cuts and Jobs Act, the Bipartisan Budget Act of 2018, and the HEALTHY KIDS Act, as outlined in the CMS State Health Official Letter 19-003.		X		Amends section 9506 of Chapter 95 of Title 29 DCMR
Final Rule – Dual Eligible Special Needs Plan (D-SNP) Combined Rulemaking	Establishes Dual Eligible Special Needs Plan under the District Dual Choice Program.		X		Adds new Chapter 57 and amends Chapters 97 and 102 of Title 29 DCMR
Final Rule – Services My Way Program	Clarifies requirements that all participant-directed workers enroll as providers with DHCF and include their NPIs on the claims submitted to DHCF for payment.		X		Amends Chapter 101 to Title 29 DCMR
Final Rule – Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)	Updates reimbursement standards for DMEPOS; clarifies the settings in which covered DMEPOS may be provided; and adds a face-to-face encounter requirement for Medicaid coverage of DMEPOS.		X		Amends Chapter 9 of Title 29 DCMR

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
Final Rule – Supportive Employment Services	Provides home- and community-based services under Section 1915(i) of the Social Security Act and permits the District Medicaid program to establish therapeutic and vocational support services to enable individuals with either a serious mental illness or SUD to find and sustain employment.		X		Promulgates rules at Chapter 107 of Title 29 DCMR
Final Rule – Medicaid Applications and Fair Hearings Rights	Removes the requirement that the application be complete to be processed; clarifies the written notice that the Department sends to the applicant when supplementary information is needed for an eligibility determination to be made; and clarifies fair hearing processes, including: the automatic scheduling of an administrative review of an adverse action prior to a fair hearing.		X		Amends Chapter 95 of Title 29 DCMR
Second Emergency and Proposed Rule – Immigrant Children’s Program Eligibility Rule	Clarifies eligibility level for ICP at levels comparable to Medicaid/CHIP for children (319% FPL for children 0-18 and 216% FPL for children 19-20, with additional 5% income disregard)		X		Amends Chapter 73 of Title 29 DCMR

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Proposed Rule – Behavioral Health Stabilization and Transition Planning	Establishes and describes steps to take when non-hospitalization emergency response is required for an individual struggling to manage their psychiatric or substance use related symptoms, and establishes transition planning services for beneficiaries stepping down from certain institutional treatment settings.		X		Promulgates rules at Chapters 106 and 108 of Title 29 DCMR
Proposed Rule – Vaccines for Children Program	Removes the restriction on VFC program administration fee reimbursement and clarifies that DHCF will reimburse the administration fee associated with providing VFC program vaccines.		X		Amends Chapter 27 of Title 29 DCMR
Proposed Rule – Pharmacy Lock-In/ DUR Requirements	Makes technical corrections to pharmacy lock-in language to better align with DHCF intent with regard to implementation; align with new requirements passed in SUPPRORT ACT.		X		Amends Chapter 27 of Title 29 DCMR
Home Health Services	Clarifies that home health aide services rates are to be adjusted annually to comply with the Living Wage.			X	Amends Chapter 99 of Title 29 DCMR

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Excess Resources and Burial Funds (Emergency and Proposed)	Clarifies methods for counting resources for individuals subject to a resource test (KB, ABD, individuals applying for/receiving LTCSS); and establishes limitations on the amount of burial funds that would be excluded from countable resources for individuals that are subject to a resource test.			X	Amends Chapters 95 and 98 of Title 29 DCMR

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		Recently Published (Date)	Pending External Review	In Development/Internal Review	
Home and Community-Based Services Waiver for Individual and Family Support (IFS)	Establishes requirements for Individual-Directed Goods and Services (IDGS) Remote Supports Services. Also: (1) modifies the developmental disabilities (DD) and intellectual disabilities (ID) eligibility criteria; (2) allow companion services to be rendered by the individual's relative when participant-directed; (4) adds service limitations and reimbursement for remote support services; (5) modifies provider qualifications for multiple services; and (6) amends assistive technology services to specify the scope of covered assistive technology goods and remove the requirement of an assistive technology comprehensive assessment for assistive technology goods costing less than one thousand dollars (\$1000).			X	Amends Chapter 90 to Title 29 DCMR

TITLE	DESCRIPTION	STATUS			NOTES/ CITATION
		Recently Published (Date)	Pending External Review	In Development/Internal Review	
Home and Community-Based Services Waiver for Individuals with Intellectual and Developmental Disabilities (IDD)	Establishes requirements for Remote Supports Services and: (1) modifies the developmental disabilities (DD) and intellectual disabilities (ID) eligibility criteria; (2) (3) modifies provider qualifications for multiple services; (4) adds service limitations for remote support services; and (5) amends assistive technology services to specify the scope of covered assistive technology goods and remove the requirement of an assistive technology comprehensive assessment for assistive technology goods costing less than one thousand dollars (\$1000)			X	Amends Chapter 19 to Title 29 DCMR
My Life, My Way	Establishes the program policies and procedures for the District of Columbia Medicaid participant-directed <i>My Life, My Way</i> program, offered under the Home and Community-Based Services Waiver for Individual and Family Support			X	Promulgates a new Chapter 111 to Title 29 DCMR